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Inventors: von Seidel et al.
Appl. Ser. No.: 10/500,663
Atty. Dkt. No.: 5991-01000

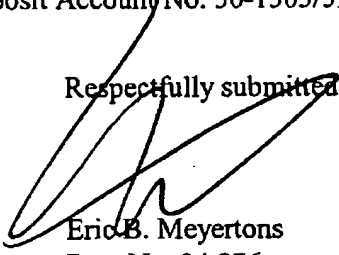
The charge for large entity Issue Fee to the deposit account is indicated on the enclosed copy of the appropriate portion of the December deposit account statement from the Patent and Trademark Office (please see Exhibit C).

Applicant received the Notice of Allowance and Issue Fee(s) Due on November 18, 2005. Applicant submitted a Response to the Notice ("Response") and Comments on Statement for Reasons for Allowance on December 13, 2005, and was (received by the PTO on December 21, 2005, as indicated by the date stamp on the enclosed copy of the post card (please see Exhibit D).

Applicant submits the small entity fee for Issue Fee is \$700.00. The total amount due for the Issue Fee, Publication Fee and 5 certified copies of application should be \$1,015.00.

Applicant respectfully requests that the Patent and Trademark Office refund \$700.00 to Meyertons, Hood, Kivlin, Kowert & Goetzel, P.C. Deposit Account No. 50-1505/5991-01000.

Respectfully submitted,


Eric B. Meyertons
Reg. No. 34,876
Attorney for Applicant

MEYERTONS, HOOD, KIVLIN, KOWERT & GOETZEL, P.C.
P.O. BOX 398
AUSTIN, TX. 78767-0398
(512) 853-8800 (voice)
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Date: February 1, 2006



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
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APPL NO.	FILING OR 371 (c) DATE	ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLMS	IND CLMS
10/500,663	07/02/2004	2859	460	9650-10	2	10	1

CONFIRMATION NO. 4357

30448
 AKERMAN SENTERFITT
 P.O. BOX 3188
 WEST PALM BEACH, FL 33402-3188

FILING RECEIPT

OC000000015165338

Date Mailed: 02/14/2005

Receipt is acknowledged of this regular Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Filing Receipt Corrections, facsimile number 703-746-9195. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Michael Von Seidel, Somerset West, SOUTH AFRICA;
 Julian Levin, Johannesburg, SOUTH AFRICA;

Power of Attorney: The patent practitioners associated with Customer Number 30448.

Domestic Priority data as claimed by applicant

This application is a 371 of PCT/IB03/00003 01/01/2003

Foreign Applications

SOUTH AFRICA 2002/0047 01/03/2002
 SOUTH AFRICA 2002/2919 04/15/2002

Projected Publication Date: 05/19/2005

Non-Publication Request: No

Early Publication Request: No

** SMALL ENTITY **

Title

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AKERMAN SENTERFITT, P.A.

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PART B - FEE(S) TRANSMITTAL

Complete and mail this form, together with applicable fee(s), to: Mail Box ISSUE FEE
Commissioner for Patents
Alexandria, VA 22313-1450
Fax (703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

30448 7590 11/18/2005

ERIC B. MEYERTONS
MEYERTONS, HOOD, KIVLIN, KOWERT & GOETZEL, P.C.
P O BOX 398
AUSTIN TX 78767-0398

Note: The certificate of mailing below can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above, or being facsimile transmitted to the USPTO, on the date indicated below.

B. Gail Ballard (Depositor's name)
B. Gail Ballard (Signature)
December 13, 2005 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMES INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/500,663	07/02/2004	Michael Von Seidel	5991-01000/EBM	4357

TITLE OF INVENTION: FREEZER FAILURE INDICATOR

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	02/21/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
REIS, TRAVIS M.	2859	116-216000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☒ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SM/47) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 MEYERTONS, HOOD, KIVLIN,

KOWERT & GOETZEL, P.C.

2 Eric B. Meyertons

3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE:

(B) RESIDENCE (CITY & STATE OR COUNTRY):

Please check the appropriate assignee category indicated below (will not be printed on the patent): ☐ individual ☐ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
☒ Publication Fee
☒ Advance Order - # of Copies 5

4b. Payment of Fee(s):

- ☒ A fee authorization in the amount of the fee(s) is enclosed.
☐ Payment by credit card. Form PTO-2038 is attached.
☒ The Commissioner if hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-1505/5991-01000/EBM* (enclose an extra copy of this form).

The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)

(Date)

Eric B. Meyertons
Reg. No. 34,876

12-13-05

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 C.F.R. 1.314. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount to time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, VA 22313. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, VA 22313.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

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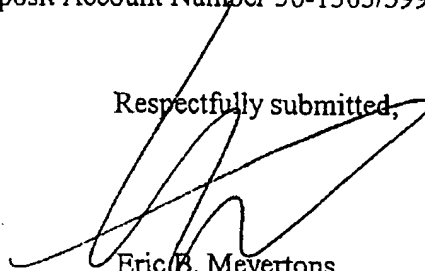
Alexandria, VA 22313
 B. Gail Ballard

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Von Seidel et al.
10/500,663

If any fees are inadvertently omitted or if any additional fees are required or have been overpaid, please appropriately charge or credit those fees to Meyertons, Hood, Kivlin, Kowert & Goetzel, P.C. Deposit Account Number 50-1505/5991-01000/EBM.

Respectfully submitted,



Eric B. Meyertons
Reg. No. 34,876

Attorney for Applicant

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(512) 853-8801 (facsimile)

Date: December 13, 2005

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No.: 10/500,663

Confirmation No.: 4357

Filed: July 2, 2004

Inventor(s):

Michael Von Seidel

Julian Levin

Title:

FREEZER FAILURE
INDICATOR

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Examiner: Reis, Travis M.

Art Unit: 2859

Atty. Dkt. No: 5991-01000

<p>CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8</p> <p>DATE OF DEPOSIT: <i>December 13, 2005</i></p> <p>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail on the date indicated above and is addressed to: Commissioner for Patents Alexandria, VA 22313-1450</p> <p><i>B. Gail Ballard</i> B. Gail Ballard</p>

FEE AUTHORIZATION

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

The Commissioner is hereby authorized to charge the following fees to Meyertons, Hood, Kivlin,
Kowert & Goetzel, P.C. Deposit Account Number 50-1505/5991-01000:

\$700.00 -- Issue Fee;

\$300.00 -- Publication Fee; and

\$ 15.00 - Five copies

Total Amount: \$1,015.00

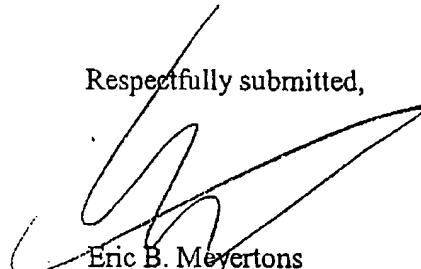
Attorney Docket No.: 5991-01000

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Von Seidel, et al.
10/500,663

The Commissioner is also authorized to charge any extension fee or other fees which may be necessary to the same account number.

Respectfully submitted,



Eric B. Meyertons
Reg. No. 34,876

Attorney for Applicant

MEYERTONS, HOOD, KIVLIN, KOWERT & GOETZEL, P.C.
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(512) 853-8800 (voice)
(512) 853-8801 (facsimile)

Date: December 13, 2005



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Deposit Account Statement

Requested Statement Month: December 2005
Deposit Account Number: 501505
Name: MEYERTONS, HOOD, KIVLIN, KOWERT & GOETZEL, P.C.
Attention: ACCOUNTS PAYABLE
Address: 700 LAVACA
City: AUSTIN
State: TX
Zip: 78701
Country: UNITED STATES OF AMERICA

DATE	SEQ	POSTING REF TXT	ATTORNEY DOCKET NBR	FEE CODE	AMT	BAL
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12/22 181	10058150	5150-61502	1501	\$1,400.00	\$5,957.00
12/22 182	10058150	5150-61502	1504	\$300.00	\$5,657.00
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12/23 20	10470646	5936-11110/EBM	2051	\$65.00	\$52,253.00
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12/27 215	10522499	5936-11111/EBM	8021	\$40.00	\$51,435.00

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COMMISSIONER OF PATENTS AND TRADEMARKS

Inventor(s): Michael von Seidel and Julian Levin
Filing Date: July 2, 2004
Title: FREEZER FAILURE INDICATOR
Atty. Dkt. No.: 5991-01000/EBM
Serial No.: 10/500,663

The date stamp of the mailroom of the U.S. Patent and Trademark Office hereon will acknowledge receipt of the following:

2 page(s) Payment of Issue Fee
1 page(s) Form PTOL-85
2 page(s) Comments on Statement of Reasons for Allowance
2 page(s) Executed Power of Attorney
1 page(s) Notice of Change of Correspondence Address
2 page(s) Fee Authorization in the amount of \$1015.00
X Return Postcard

EBM:bgb

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Date: December 13, 2005

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